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CONFIRMATION NO. 6683

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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/396,572 07/18/2002 *WED*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

FRANCE 02 08563 07/08/2002 *WED*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 04/19/2005

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY FRANCE	SHEETS DRAWING 6	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	EXAMINER'S SIGNATURE <i>W. J. Jones</i>	INITIALS <i>WED</i>		
Verified and Acknowledged				

ADDRESS

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TITLE

Process for automatic removal of packages

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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